Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (703) 746-4000

INSTRUCTIONS: This for appropriate. All further cor- indicated unless corrected be maintenance fee notification	m should be used for transn respondence including the Pa selow or directed otherwise in s.	nitting the ISSUI tent, advance ord 1 Block 1, by (a)	E FEE and PU ders and notific specifying a n	BLICATION FEE (if requation of maintenance fees vew correspondence address	nired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for an	y change of address)		Fee(s) Transmittal. The papers. Each addition	f mailing can only be used for his certificate cannot be used a al paper, such as an assignment the of mailing or transmission.	for any other accompanying
MILES & STOCKBRIDGE PC 1751 PINNACLE DRIVE SUITE 500 MCLEAN, VA 22102-3833			PE 3025 33	Ce I hereby certify that ti States Postal Service addressed to the Ma	rtificate of Mailing or Transhis Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the control of	g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.
07/26/2005 MBEYENE2 000	0000// 106/6158	13				(Depositor's name)
01 FC:1501 02 FC:1504 03 FC:2001	1400.00 DP 300.00 DP 3.00 DP	FRATS TO	RADEMAR			(Signature) (Date)
APPLICATION NO.	FILING DATE	FIRST NAMED		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/676,158	10/02/2003	Kozo Katayama		yama	XA-9583B	6700
TITLE OF INVENTION: NO	ONVOLATILE MEMORY D	EVICE ISSUE FE	E	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$300	\$1700	07/25/2005 .
EXAMINER		ART UNIT		CLASS-SUBCLASS	ר	
NGO, NGAN V		2818		257-320000	J	
1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/12 "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	(1) the names of up to 3 registered paten or agents OR, alternatively, (2) the name of a single firm (having as a registered attorney or agent) and the nam 2 registered patent attorneys or agents. If listed, no name will be printed.			nt attorneys 1 Miles a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	& Stockbridge PC	
	RESIDENCE DATA TO BE		•	71 /		
recordation as set forth in	an assignee is identified belo 37 CFR 3.11. Completion of	this form is NOT	a substitute for	filing an assignment.	nee is identified below, the d	locument has been filed for
(A) NAME OF ASSIGNI	BE .	(B)	(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Renesas Technology Corp. Tokyo, Japan						
Please check the appropriate	assignee category or categorie	es (will not be pri	nted on the pate	nt): 🔲 Individual 🖾 C	orporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): X A check in the amount of the fee(s) is enclosed.						
Issue Fee Publication Fee (No small entity discount permitted) A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies 1 Deposit Account Number 50-1165 (enclose an extra copy of this form).						credit any overpayment, to copy of this form).
	(from status indicated above) MALL ENTITY status. See 37				LL ENTITY status. See 37 C	
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	is requested to apply the Issue ablication Fee (if required) will rds of the United States Patent	Fee and Publicati I not be accepted and Trademark (on Fee (if any) from anyone of Office.	or to re-apply any previous her than the applicant; a reg	ly paid issue fee to the application is tered attorney or agent; or the	ation identified above. he assignee or other party in
Authorized Signature	MANDE	Shy	7/	Date	25/05	
Typed or printed name	Mitchell W. Shap	iro /		Registration	No. 31,568	
This collection of information an application. Confidentialities submitting the completed applies form and/or suggestions.	n is required by 37 CFR 1.311 ty is governed by 35 U.S.C. 1 plication form to the USPTO for reducing this burden, should	. The information 22 and 37 CFR 1 . Time will vary o	is required to on the collection of the collecti	obtain or retain a benefit by tion is estimated to take 12 the individual case. Any	the public which is to file (an minutes to complete, includir comments on the amount of ti	d by the USPTO to process) ng gathering, preparing, and me you require to complete

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.